



COUNTY of SUSSEX

RESIDENTIAL CONSTRUCTION APPLICATION

Applicant's Name: _____ Date _____

Address: _____ City: _____ State: _____ Zip Code: _____

State License No: _____ Specialty: _____ Class: _____ Expiration Date: _____

Telephone Number: (_____) _____ (Work) (_____) _____ (Home) (_____) _____

Email Address: _____

Property Owner: _____ Location of Work: _____

District: _____ Tax Parcel ID Number: _____

(Please Indicate the Number of Rooms, etc. for the following):

BEDROOMS _____ DEN/GR RM _____ UTILITY RM _____ CARPORT _____ EXTERIOR _____

BATHROOMS _____ DINING RM _____ FOYER _____ PORCHES _____ HEAT TYPE _____

LIVING RM _____ KITCHEN _____ GARAGE _____ STUDY _____

STORAGE _____ DECK(S) _____ BASEMENT _____ FIREPLACES _____

GROSS AREA _____ **TOTAL VALUE OF CONSTRUCTION** \$ _____

MECHANIC LIEN AGENT:	DESCRIPTION: _____ Story SFD/MODULR/GAR APT _____ On Frame _____ Off Frame *Please include sq. footage for each item checked	
	NAME:	<input type="checkbox"/> Garage <input type="checkbox"/> Screened Porch
	ADDRESS:	<input type="checkbox"/> R.O.G. <input type="checkbox"/> Front Porch
		<input type="checkbox"/> Front Deck <input type="checkbox"/> Back Porch
		<input type="checkbox"/> Back Deck <input type="checkbox"/> Covered Porch
PHONE NO. () -	<input type="checkbox"/> Side Deck <input type="checkbox"/> Basement	
() NO MLA DESIGNATION	<input type="checkbox"/> Patio Deck <input type="checkbox"/> Detached Garage	

In accordance with Chapter 1, Article 1, Sections 108.0 and 109.0 of the Virginia Uniform Statewide Building Code, the following information contained on the back of this sheet is an integral part of this application and shall be submitted prior to commencing Plan Review.

I hereby certify that I have the authority to make the foregoing application and that the application, to the best of my knowledge, is complete and correct and that the permitted construction will conform to the regulations of the Uniform Statewide Building Code and all applicable Ordinances.

Signature (*) _____ Date _____

CONTRACT/JOB AMOUNT \$ _____

General Permit Required Information

Submitted

	<u>Yes</u>	<u>N/A</u>
Private Sewage Disposal System Permit		
Zoning Permit or Waiver (must have one or the other)		DO NOT USE
Water Tap Fee receipt		
Sewer Tap Fee Receipt		
Footing & Foundation Plan		
Footing & Foundation Details		
First Floor Plan		
Second Floor Plan		
Deck Framing Plan & Details		
2 – Sets of complete construction documents and plans		DO NOT USE

I _____ hereby certify all documents indicated above are included with this
Print Name
application. If after review the application is deemed incomplete I will be assessed a \$50 re-review fee that shall be paid prior to processing the application and issuance of the permit.

Signature_____
Date

GENERAL CONTRACTOR:	ADDRESS:
VA.STATE LICENSE NUMBER:	
CLASS / EXPIRATION:	COST ESTIMATE: \$

MECHANICAL CONTRACTOR:			
VA.STATE LICENSE NUMBER:		ADDRESS:	
CLASS / EXPIRATION:			
OPERATING DATA	BTU RATING	FUEL TYPE	COST ESTIMATE: \$

PLUMBING CONTRACTOR:	ADDRESS:
VA. STATE LICENSE NO:	
CLASS / EXPIRATION:	COST ESTIMATE: \$

ELECTRICAL CONTRACTOR:	ADDRESS:
VA. STATE LICENSE:	
CLASS / EXPIRATION:	COST ESTIMATE: \$

SHRINK SWELL SOIL DISCLOSURE

I (WE) HAVE, OR MY (OUR) CONTRACTOR HAS APPLIED FOR A BUILDING PERMIT TO ERECT A BUILDING IN SUSSEX COUNTY, VIRGINIA.

THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION R.401.4 LIST SUSSEX COUNTY ALONG WITH MANY OTHER LOCALITIES IN THE STATE OF VIRGINIA AS HAVING A **20%** OR GREATER POTENTIAL FOR SHRINK SOIL IN THIS LOCALITY.

I (WE) HAVE BEEN INFORMED BY THE SUSSEX COUNTY BUILDING INSPECTIONS DEPARTMENT OF THE POSSIBILITY THAT SHRINK SWELL SOIL MAY EXIST ON MY (OUR) BUILDING SITE. I (WE) HAVE ALSO BEEN ADVISED OF THE NATURE OF THE DAMAGE THE PRESENCE OF SHRINK SWELL SOIL MAY CAUSE TO A BUILDING, TO INCLUDE FOOTING FAILURE, FOUNDATION FAILURE AND RESIDENTIAL STRUCTURAL DAMAGE.

I (WE) HAVE FURTHER BEEN ADVISED BY THE SUSSEX COUNTY BUILDING INSPECTIONS DEPARTMENT THAT I (WE) SHOULD CONSULT A PROFESSIONAL ENGINEER FAMILIAR WITH SHRINK SWELL SOIL TO DESIGN MY (OUR) FOOTING AND FOUNDATION. BY SIGNING THIS DOCUMENT, I (WE) AGREE THAT SUSSEX COUNTY AND/OR ITS OFFICIALS WILL BE HELD HARMLESS FOR ANY AND ALL STRUCTURAL FAILURES OR OTHER DAMAGES I (WE) MY INCURE BECAUSE OF THE PRESENCE OF SHRINK SWELL SOIL SHOULD I (WE) DECIDE TO BUILD ON THE SITE IN QUESTION.

DONE THIS _____ DAY OF _____, _____, IN THE COUNTY OF SUSSEX.

OWNER _____

DATE _____

OWNER _____

DATE _____

WITNESS _____

DATE _____

WITNESS _____

DATE _____

PROPERTY OWNER'S AFFIDAVIT

I, _____, of _____, affirm that I am the owner

 Print Name Present Address
 of a certain tract or parcel of land located at: _____ and that I have
 applied for a building permit. I affirm that I am familiar with the prerequisites of Section §54.1-1111 of the Code of
 Virginia, as amended, and I am not subject to licensure as a contractor or subcontractor.

I am fully aware that any permit (building, mechanical, plumbing or electrical) issued to me pursuant to the application to which this affidavit is attached is valid only if I, personally perform the work for which the permit(s) is/are issued OR am personally supervising my employees, who must have the necessary licensure if required by law to perform such work. Allowing a person other than myself, employee(s), who, when required by law, must have the necessary licensure to perform such work under my supervision, to perform the work covered by this permit(s) shall immediately void the permit(s) and subjects me as well as the non-employee and/ or unlicensed employee, when licensure to perform the work is required by law, to possible criminal charges for failure to obtain a building permit.

_____(Affiant)

Signed and acknowledged by _____, in the County of Sussex, VA on the _____ day of _____, 2014, in the presence of the undersigned witness.

My commission expires _____.

My registration number is _____.

NOTARY PUBLIC

§54.1-1111 Prerequisites to obtaining building, etc. permit – Any person applying to the building inspector or any other authority of a county, city or town in this Commonwealth, charged with the duty of issuing building or other permits for the construction of any building, highway, sewer or structure, or any removed, grading or improvement shall furnish prior to the issuance of the permit, either (i) satisfactory proof to such inspector or authority that he is duly licensed or certified under the terms of this chapter to carry out or superintend the same, or (ii) file written statement, supported by an affidavit, that he is not subject to licensure or certification as a contractor or subcontractor pursuant to this chapter.

It shall be unlawful for the building inspector or other authority to issue or allow the issuance of such permits unless the applicant has furnished his license or certificate number issued pursuant to this chapter or evidence of being exempt from the provisions of this chapter.

The building inspector, or other such authority, violating the terms of this section shall be guilty of a Class 3 misdemeanor. (Code 1950, 54-138; 1970, c. 319; 1980, c. 634; 1988, c. 765, 1990 c. 911; 1991, c. 151; 1992, c. 713; 1995, c. 771; 1998, c. 754.)

Cross references. As to punishment for Class 3 misdemeanors, see §18.2-11

The 1998 amendment, in the first paragraph, in the first sentence, in the clause (ii) inserted “or” following “certification as a contractor,” and deleted “or owner-developer” following “subcontractor.”

**AGREEMENT IN LIEU OF AN EROSION AND SEDIMENT
CONTROL PLAN FOR A SINGLE FAMILY DWELLING**

In lieu of an erosion and sediment control plan for the construction of a single family dwelling, I agree to comply with any reasonable requirements determined necessary by the Erosion and Sediment Control Plan Administrator of Sussex County. Such requirements shall be based on the conservation standards contained in Erosion and Sediment Control Ordinance, Chapter 12, Article IV, Sections 12-71 thru 84 of the County Code of Ordinance, and the Virginia Erosion and Sediment Control Law and Regulations, and shall represent the minimum practices necessary to provide adequate control of erosion and sedimentation on or resulting from this project.

At a minimum, any necessary perimeter sediment trapping measures will be installed and all denuded areas on the lot shall be stabilized within seven (7) days of final grading with permanent vegetation or protective ground cover suitable for the time of year. Areas where permanent grade has not been achieved, but which are idle for a period of thirty (30) days or more, shall be stabilized with temporary vegetation or other approved measures.

A construction entrance shall be provided in all cases, the design of which shall be depicted on the site plan for the property and shall be approved by the Erosion and Sediment Control Program Administrator.

I further understand that failure to comply with such requirements, within three (3) working days, following notice by the representatives of Sussex County may result in a citation for violation of the County Code of Ordinance and the Virginia Erosion and Sediment Law and Regulations.

Additional measures specified by the Plan Approving Authority:

_____Sig

nature of property owner (*required*): _____ Date: _____

Responsible party for Erosion and Sediment Control (*if different than land or property owner*):

Printed Name: _____

Address: _____

Signature: _____ Date: _____

EROSION & SEDIMENTATION SCREENING FORM

Project: _____

E&S Project File #: _____

Applicant: _____

Building Permit #: _____

(Name)

(Address)

(Phone: Home/Cell)

This project will require:

☐ grading ☐ excavating ☐ clearing ☐ filling ☐ other _____

Purpose: _____

Location: _____

Area to be disturbed: _____ acres; _____ sq ft.

Total area of the property: _____ acres; _____ sq ft.

Is the structure a single family dwelling? ☐ Yes ☐ No

Is it located in a residential subdivision? ☐ Yes ☐ No

If yes, subdivision name: _____

=====

FOR OFFICE USE ONLY

Checked by: _____

Date: _____

- ☐ Requires an Erosion & Sediment Control Plan
☐ Requires an Agreement in Lieu of an Erosion & Sediment Control Plan
☐ Exempt (See comments in Purpose for Exempt Activity)

Comments: _____

Fee: \$75.00
Acreage: _____
District: _____
Tax Map Number: _____

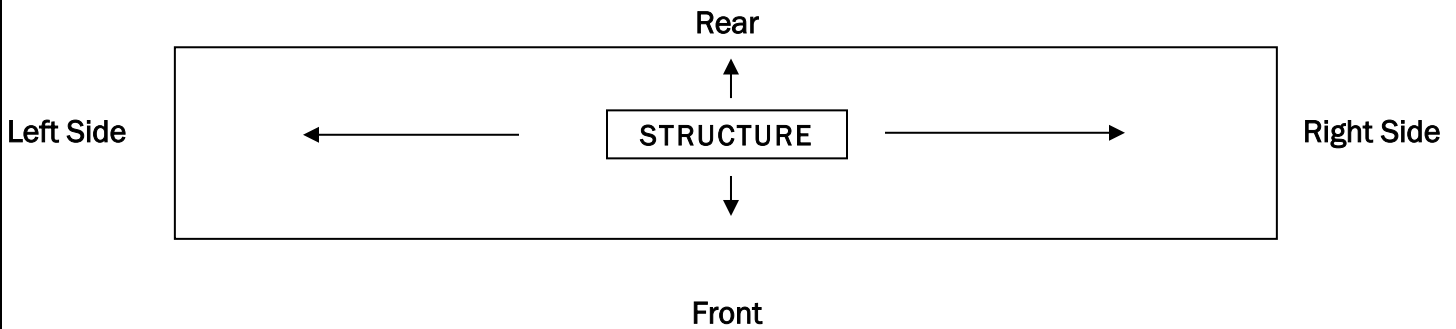


Sussex County Community Development
Department
Post Office Box 1397
20135 Princeton Square
Sussex, Virginia 23884
Phone: 434-246-1043
Fax: 434-246-2175

Zoning Application

SITE OR PLOT PLAN- FOR APPLICANT USE

Show Setbacks from all four property lines



Name: _____

Address: _____

Phone: _____ Subdivision: _____

Proposed Use:

{Example: Single Family Dwelling, Single-wide manufactured home, double-wide, modular, etc.}

Setbacks: Front: _____ft Back: _____ft Right: _____ft Left: _____ft

FOR OFFICIAL USE ONLY:

Zoning Classification: _____

____ APPROVED

____ DENIED

ZONING ADMINISTRATOR

DATE



Sussex County
Community Development
Department
Post Office Box 1397
20135 Princeton Road
Sussex, Virginia 23884
Phone: 434-246-1043
Fax: 434-246-2175

Fee: \$10.00

Address Application

Site Information	Applicant Information	Reference Information:
Owner Name:	Name:	Addresses for Adjacent Properties:
Lot Number:	Mailing Address:	Left: _____
Street:	City State Zip:	Right: _____
Parcel Tax Number:	Phone:	Check One: <input type="checkbox"/> Public Water <input type="checkbox"/> Private Water/Septic

Site Plan:

Each application must include a sketch of the lot showing the building or structure to be addressed. Please attach a copy of the most recent survey plat of the lot or parcel in question.

Signed

Date: